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APPLICANTS

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** CONTINUING DATA ***** NONE B.R.

** FOREIGN APPLICATIONS ***** B.R.
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| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no | STATE OR COUNTRY GERMANY | SHEETS DRAWING 3 | TOTAL CLAIMS 8 | INDEPENDENT CLAIMS 1 |
| 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged Examiner's Signature <u>Bausabhi Day</u> Initials <u>B.R.</u> | | | | |

ADDRESS

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TITLE

Magnetic resonance apparatus with a movable gradient coil unit

FILING FEE

RECEIVED

FEES: Authority has been given in Paper
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 No. _____ for following:

- ☐ All Fees
- ☐ 1.16 Fees (Filing)
- ☐ 1.17 Fees (Processing Ext. of time)

880

☐ 1.18 Fees (Issue)

☐ Other _____

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